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 Request for Customer Number (PTO/SB/125) submitted herewith.

in the following listed application(s) or patent(s) :

Patent Number (if appropriate)	Application Number	Patent Date (if appropriate)	U.S. Filing Date
	10/019,521		12/27/01

Typed or Printed Name	Kevin W. Raasch	(check one)
Signature		<input type="checkbox"/> Applicant or Patentee
Date	30 JULY 2002	<input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
Address of signer:	Muetting, Raasch & Gebhardt, P.A. P.O. Box 581415, Minneapolis, MN 55458-1415	<input checked="" type="checkbox"/> Attorney or Agent of record 35,651 (Reg. No.)
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		

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